

were detained without charge or trial in India, Amnesty International said in its annual report, released on June 16.

Torture and ill-treatment continued to be widespread, and hundreds of people were reported to have died in custody, the London-based human rights organization added.

"Conditions in many prisons amounted to cruel, inhuman or degrading treatment," it said, adding that "disappearances" also continued and hundreds of extrajudicial executions were reported. At least 35 people were sentenced to death but no executions were reported, the report said.

The London-based human rights watchdog said armed groups were also to blame. These groups committed grave human rights abuses including torture, hostage-taking and killing of civilians, it said.

Overall, the report lamented that 1998, which marked the 50th anniversary of the Universal Declaration of Human Rights, was marred by a worldwide catalogue of abuses.

But Amnesty secretary general Pierre Sane also pointed to two landmark events—the establishment of a permanent International Criminal Court and the arrest in October of former Chilean President Augusto Pinochet—which could help make human rights violators answerable.

Amnesty also singled out the United States as the only country known to have executed juvenile offenders in 1998.

INTRODUCTION OF THE CRITICAL CARE SPECTRUM ACT

HON. JAY INSLEE

OF WASHINGTON

IN THE HOUSE OF REPRESENTATIVES

Tuesday, June 29, 1999

Mr. INSLEE. Mr. Speaker, I rise today to introduce the Critical Care Spectrum Act, which will benefit victims of heart failure and strokes by ensuring appropriate broadcast spectrum for medical telemetry devices. I have been working closely with hospitals, medical equipment manufacturers, health care providers, broadcasters, patients and other users of the broadcast spectrum to achieve the legislation introduced today. I am especially grateful for the guidance and assistance I have received.

Medical telemetry devices have allowed greater care for victims of heart failure and strokes. These devices send a signal, using part of the allocated broadcast spectrum, from a monitoring device attached to a patient to a central receiving point where the data can be viewed by medical personnel. Doctors and health care workers tell me that these devices are essential to the delivery of quality health care because they provide instant information about a patient and can warn doctors before medical problems become too severe to treat.

In recent years, the broadcast spectrum has become crowded with wireless communications, satellite broadcast transmissions, and the growing number of radio and television stations. As a result of the Telecommunications Act of 1996, the spectrum has become even more cluttered, due to the requirement for television stations to change to digital broadcasts. While stations make plans to move to the new digital spectrum, they retain their analog broadcasts, and take up more of the spectrum than they require. The increasing number of broadcast channels has given con-

sumers a variety of programming choices to choose from, but has also posed an indirect threat to medical telemetry devices, some of which use the same broadcast spectrum.

Last year in Dallas, when a television station switched on to a digital broadcast, it knocked out the telemetry devices in Baylor University Medical Center. We were lucky that no significant injuries occurred, and the television station in Dallas should be commended for taking the station off the air as soon as they were made aware of the problem. This event served as a wake up call to medical telemetry device manufacturers and broadcasters alike. The Federal Communications Commission (FCC) issued advisories to stations that were planning to switch over to a digital broadcast. The advisories have been very helpful, and broadcasters have been working with local health care facilities to make sure the Dallas situation does not happen again.

In my home state, I recently learned about the precautions that were taken when KOMO-TV, Channel 4, switched over to a digital broadcast. KOMO was in constant communication with all health care facilities in the broadcast area, and had technical representatives on hand in each of the facilities to make sure that no medical telemetry devices were impacted. KOMO, KING-TV and KCTS in Seattle have all switched to digital broadcasts. They have shown exceptional leadership and community concern with regard to this issue, and I am grateful not only for their concern, but for their assistance through the Washington State Broadcasters Association with the introduction of this legislation.

We can't expect this success to continue without defining which areas of the spectrum should be reserved for medical telemetry devices. As more and more stations flip the switch and go digital, the spectrum gets more and more crowded.

Medical telemetry manufacturers have been aggressive in solving this problem too. Spacelabs Medical, located in my Congressional District in Redmond, Washington, has been working closely with the American Hospital Association, the FCC and the Joint Working Group on Telemedicine to reach a solution to this problem. I look forward to working with all parties on a resolution to this issue.

Lastly, I would like to acknowledge the assistance of the following groups who have been so helpful in crafting this legislation. They include Spacelabs Medical, the American Hospital Association, the Washington Hospital Association, Evergreen Hospital, Harborview Medical Center, the Joint Working Group on Telemedicine, Hewlett-Packard, the Washington Association of Broadcasters, Western Wireless, AT&T Wireless, PhRMA, American Home Products and countless others.

I urge my colleagues to join me by cosponsoring the Critical Care Spectrum Act of 1999.

INTRODUCTION OF H. CON. RES. 144 URGING THE RELEASE FROM THE FEDERAL REPUBLIC OF YUGOSLAVIA OF THREE DETAINED EMPLOYEES OF CARE

HON. BENJAMIN A. GILMAN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, June 29, 1999

Mr. GILMAN. Mr. Speaker, I have today introduced H. Con. Res. 144. The purpose of this resolution is to call attention to the case of three humanitarian workers unjustly imprisoned by the Federal Republic of Yugoslavia. Branko Jelen, Steve Pratt and Peter Wallace were employed in Yugoslavia by CARE International, the world famous relief and development organization, providing food, medicines and fuel to refugees in Serbia and Kosovo. In late March and early April, these three men were detained and later accused of operating an "espionage ring." In a closed military court, their original indictments were dismissed only to be replaced by a new but similar charge of passing on information to a foreign organization. Their crime: providing CARE offices with "situation reports" based on experiences and openly available information. This standard procedure ensures that the organization's headquarters remains posted on the progress, prospects, and perils of their many humanitarian missions. The three are currently serving sentences of up to 12 years in Serbia. As this resolution clearly states, "the three men are innocent, committed no crime, and are being held prisoner unjustly."

The contribution made by organizations like CARE is of great importance to international humanitarian efforts around the globe. Although they work in unstable and often dangerous areas, these aid agencies must be confident in their ability to operate safely. It is for this reason that the threat of groundless charges and indefensible incarcerations is so dangerous to relief operations. Many world leaders, including U.N. Secretary General Kofi Annan and South African President Nelson Mandela, have already sought the release of these three men. This measure urges the Government of the United States to undertake strenuous efforts to secure their freedom and as asserted in the resolution, "calls on the Government of the Federal Republic of Yugoslavia . . . to give these workers their freedom without further delay." I want to thank my colleague from Alabama, Mr. CALLAHAN, the chairman of the Foreign Operations Subcommittee, for joining me on this effort. As members who work closely with the international NGO community, we are keenly aware of the contribution people like these gentlemen make to ending suffering around the world. I encourage the House of Representatives to declare our support for organizations such as CARE and our intolerance of the unjust imprisonment suffered by these three humanitarian workers by unanimously supporting H. Con. Res. 144.